



Environmental Enterprise Group, Inc. 1949 Avenue D North Charleston, SC 29405-2106 TEL (843) 202-8008 FAX (843) 202-8001 http://www.eeginc.net



January 31, 2002 Ser 245

FES 4 2002

Water Monitoring, Assessment &

Protection Division

Mr. Michael Bishop Bureau of Water 2600 Bull Street Columbia, SC 29201-1708

Re: UST Monitoring Wells abandoned on Charleston Naval Complex

Dear Mr. Bishop,

Please find enclosed Water Well Records, DHEC form 1903, for the Monitoring Wells listed below that have been abandoned at UST locations throughout the Charleston Naval Complex. EEG, Inc. was requested to forward these forms for work performed under a contractual agreement with CH2M-Jones, LLC.

Site 05 / Building 647	Site 21 / Building 241
SC DHEC # 01165	SC DHEC # 17706
CNC05-M04	CNC21-MW02
CNC05-M05	CNC21-MW03
	CNC21-MW04
Site 09 / Building 654	CNC21-MW05
SC DHEC # 00963	CNC21-MW06
CNC09-M07	CNC21-MW08

Site 20 / Building 240 SC DHEC # 14689 CNC20-MW01 Site 28 / Building 590A SC DHEC #00956 CNC28-M03

If there are any questions or if more information is needed, please contact J. N. K. Tunstall at (843) 202-8008.

Sincerely

Richard Albers Vice President

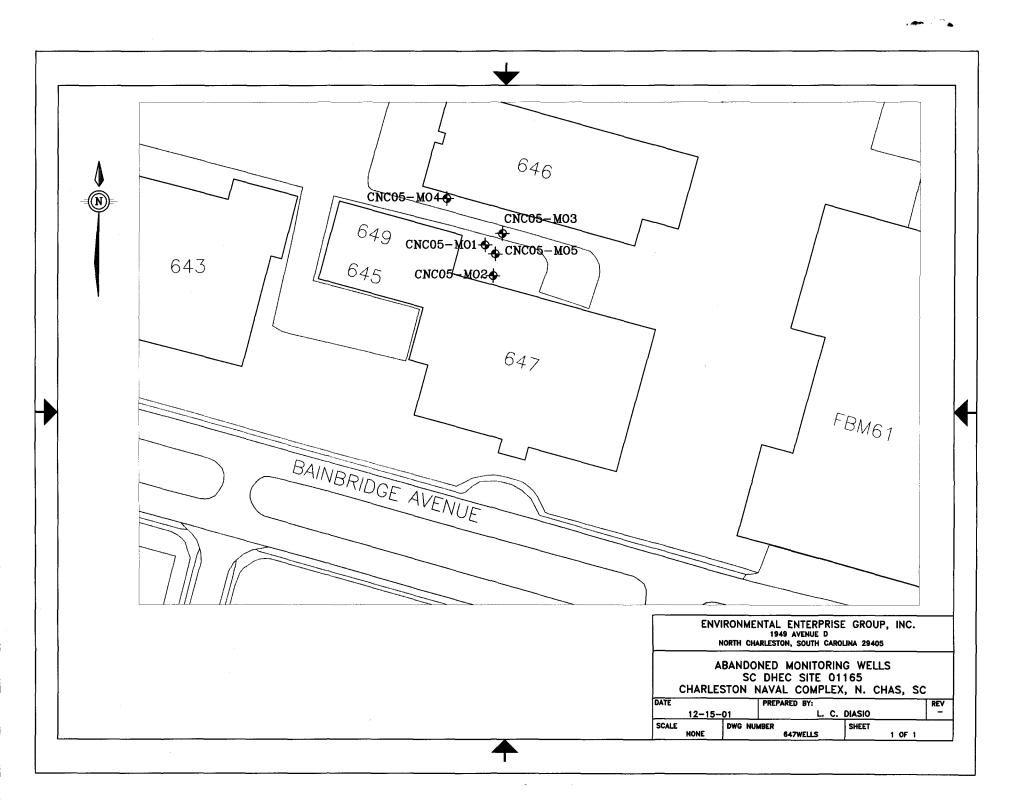
Encl.: DHEC form 1903, Water Well Records

Cc: Mr. Paul Bergstrand, RCRA Hydrology Section, Bureau of Land and Waste Management, 2600 Bull St., Columbia, SC 29201-1708



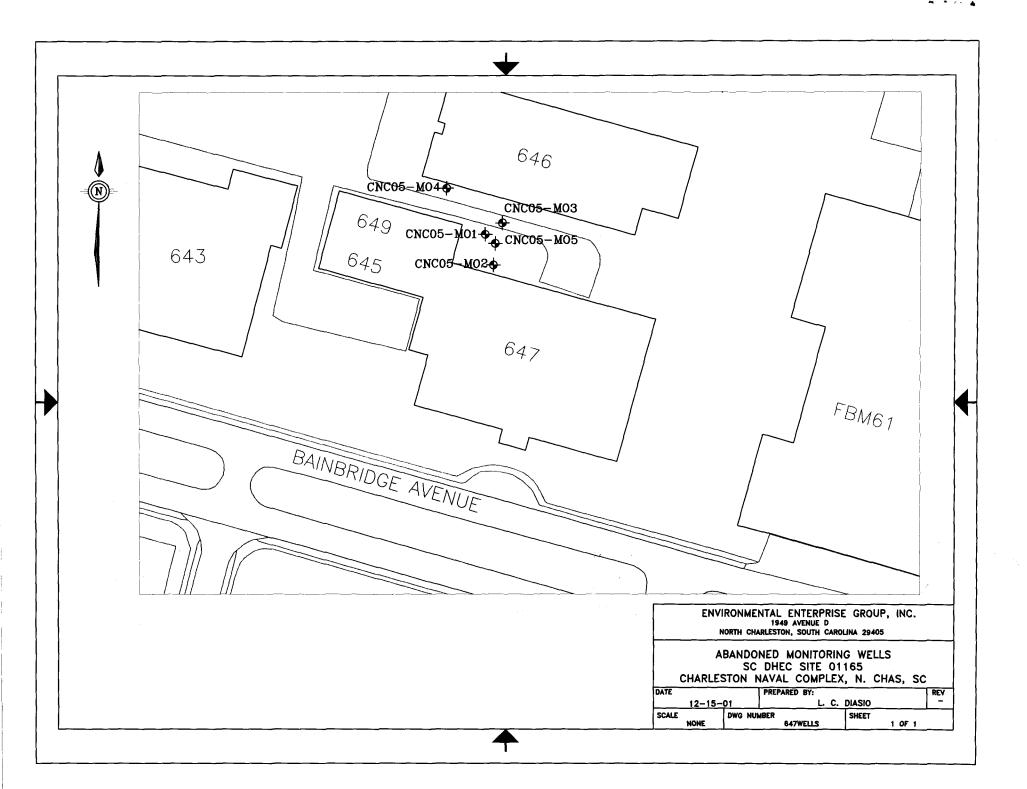
Water Well Record

PROMOTE PROTECT PROSPER 2600	Bureau of Water 2600 Bull Street, Columbia, SC 29201-1708; (803) 734-5300	
LOCATION OF WELL: County: Charleston System Name:	4. OWNER OF WELL: Department of the Navy Address: Telephone No.:	
Latitude: Longitude: Distance and Direction from Road Intersections:	Engineer: Address: Telephone No.:	
St Address & City of Well Loc: 2010 Bainbridge Ave, N. C Sketch Map:	has 5. WELL DEPTH (completed) Date Started: ft. Date Completed:	
See Map. Well Number: CNC05-M04	6. Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other	
	7. USE: Domestic Public Supply—Permit No. Industry Irrigation Air Conditioning Commercial Test Well Monitor Well 8. CASING: Threaded Welded	
2. CUTTING SAMPLES:s	Diam.:	
*Thickness Depth to Formation Description of Bottom o Stratum Stratum	Type:	
	70. STATIC WATER LEVEL	
	Yield:	
	13. ARTIFICIAL FILTER (gravel pack) Yes No Installed from ft. to ft. Effective size Uniformity Coefficient	
	14. WELL GROUTED? ☐ Yes ☐ No ☐ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other ☐ Depth: From	
	Type well disinfected	
	16. PUMP: Date installed:	
*Indicate Water Bearing Zones (Use a 2nd sheet if needed)	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.	
3. REMARKS: Zone H, Site 05/ Bldg 647, DHEC ID# 01165	Registered Business Name: FEG. TNC Date: Address: 1949 AVENUE D. N. CHAS SC 29405 Signed: Authorized Representative Cert. No.: 54	



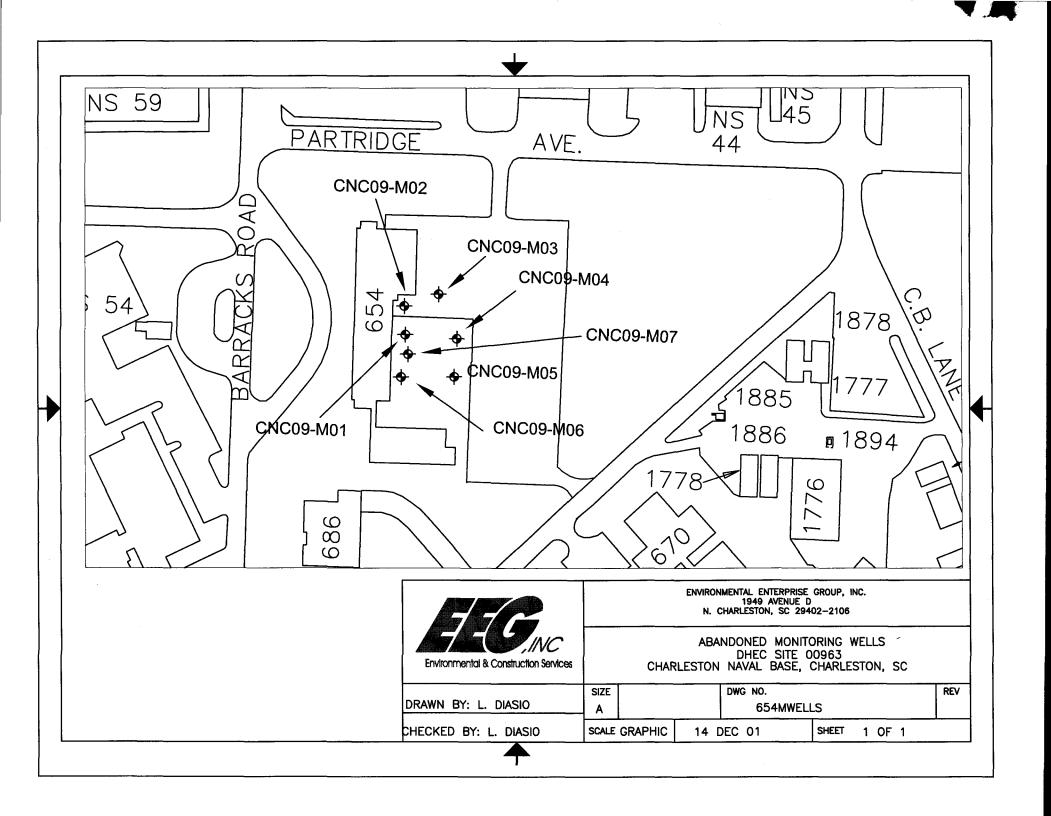


1. LOCATION OF WELL:	4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Telephone No.:
St Address & City of Well Loc: 2010 Bainbridge Ave, N	
Sketch Map:	ft. Date Completed:
See Map. Well Number: CNC05-M05	6. Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other
	7. USE:
	Domestic Public Supply-Permit No Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☐ Monitor Well ☐ ☐ ☐
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below
2. CUTTING SAMPLES: 👝s 👝o	Type: PVC Salvanized Surface ft. Steel Other Weight lb./ft.
	In toft, depth Drive Shoe? ☐ Yes ☐ No
Geophysical Logs:	ft. depth
*Thickness Depti Formation Description of Botton	o. Concern
Stratum Strat	n of Type Diam.:
	tt. etween:ft. andft. NOTE: MULTIPLE SCREENS
	ft. andft. USE SECOND SHEET
	STATIC WATER LEVEL
	ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
	ft. afterhrs. PumpingG.P.M.
	Pumping Test: Yes (please enclose) No
	Yield:
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
	Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No
	Installed from ft. toft. Effective size Uniformity Coefficient
	14. WELL GROUTED? Yes No
	□ Neat Cement □ Sand Cement □ Concrete □ Other
	Depth: Fromft. toft.
	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
	Type well disinfected Yes Type: upon completion No Amount:
	16. PUMP: Date installed:Not installed 2
	Mfr. Name: Model No.:
	H.PVoltsLength of drop pipe ft. Capacitygpm
	TYPE: Submersible Jet (shallow) Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal 17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under
*Indicate Water Bearing Zones	my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: EEG, INC Date:
3. BEMARKS:	Address: 1949 AVENUE D. N.C.MS SC 29405 Signed: Authorized Representative Authorized Representative
Zorle H, Site 05/ Bldg 647, DHEC ID# 01165	Address: The state of the state
	Signed: / Momes / Korwor & Cert. No.: 07
	Authorized Representative



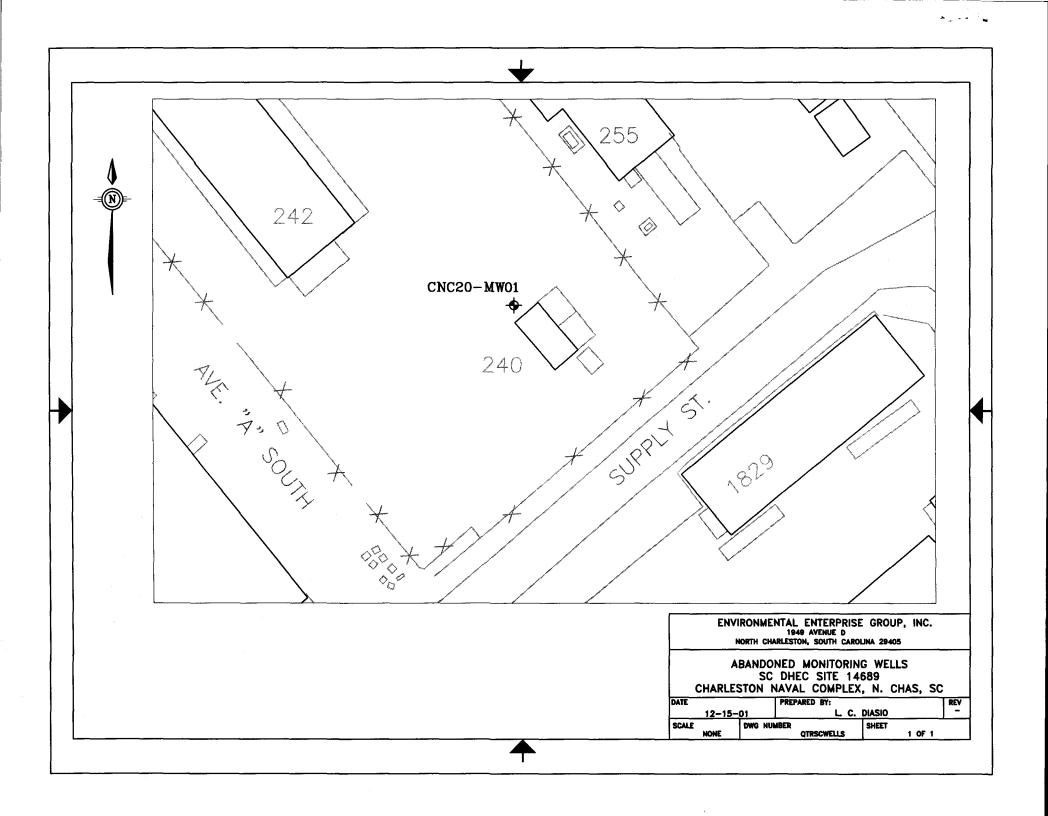


1. LOCATION OF WELL:	4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Telephone No.:
Street Address & City of Well Location: 1275 Barracks Rd., N. 6	5. WELL DEPTH (completed) Date Started:
Sketch Map:	ft. Date Completed:
See Map. Well Number: CNC09-MW07	6. Mud Rotary Detted Bored Dug
	☐ Air Rotary ☐ Driven ☐ Cable tool ☐ Other
	7. USE:
	☐ Domestic ☐ Public Supply—Permit No ☐ Industry ☐ Irrigation ☐ Air Conditioning ☐ Commercial
	Test Well Monjtor Well
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below
2. CUTTING SAMPLES: Yes No	Type: PVC Galvanized Surface ft.
	☐ Steel ☐ Other Weight lb./ft. in. to ft. depth Drive Shoe? ☐ Yes ☐ No
Geophysical Logs: Yes (please enclose) No	in. toit. depth Drive Shoe? Yes No
*Thickness Depth i	
Formation Description of Bottom	of Tynd Diam:
Stratum Stratur	Slet (lauge: Length:
	T. AndII. NOTE: MOLTIPLE SCREENS
	ft. andft. USE SECOND SHEET
· ·	TO STATIC WATER LEVEL
	ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
	ft. afterhrs. PumpingG.P.M.
	Pumping Test: Yes (please enclose) No
RECEIVED	Yield:
NECET 12D	12. WATER QUALITY
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
FEB 4 2002	Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No
Water Monitoring, Accessment &	Installed fromft. toft.
Protection Division	Effective sizeUniformity Coefficient 14. WELL GROUTED?
Protection Division	□ Neat Cement □ Sand Cement □ Concrete □ Other
/	Depth: Fromft. toft.
	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
	Type well disinfected Yes Type:
	upon completion ☐ No Amount:
	16. PUMP: Date installed:Not installed 🗹
	Mfr. Name:Model No.:
	H.PVoltsLength of drop pipe ft. Capacitygpm
	TYPE: Submersible Jet (shallow) Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	 WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	그는 내가 되는 사람들이 되었다. 그는 사람들이 되는 사람들이 되었다면 하지만 하지만 하지만 하지만 되었다. 그는 사람들이 되었다면 하지만
3. REMARKS:	Registered Business Name: FEG INC Date:
Zone H, Site 09/Building 654, DHEC ID# 00963	Address: 1997 AVENUE 1), M. CMS, SC 29905
	Address: 1949 AVENUE D. M. CMS, SC 29405 Signed: Thomas A Brunn Cert. No.: 54
	Authorized Representative



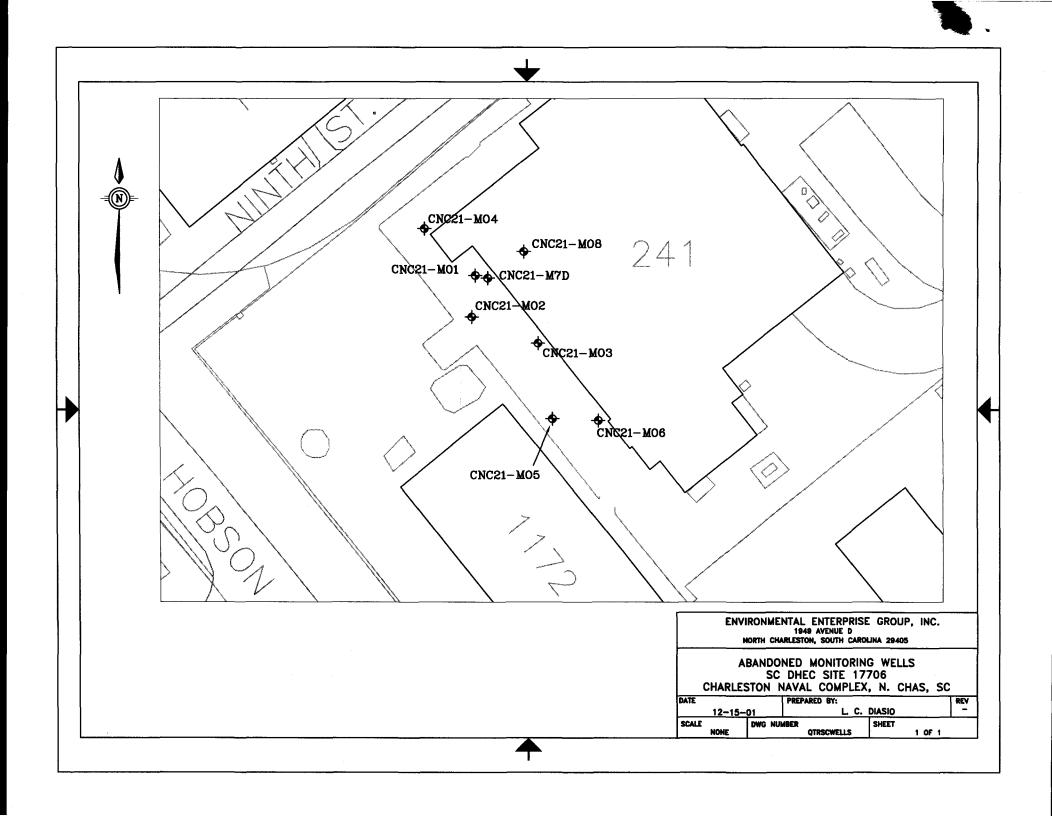


1. LOCATION OF WELL:	OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Telephone No.:
St Address & City of Well Loc: Supply Street, N. Chas., SC	5. WELL DEPTH (completed) Date Started:
Sketch Map:	ft. Date Completed:
See Map. Well Number: CNC20-MW01	6. Mud Rotary Jetted Bored Dug
	☐ Air Rotary ☐ Driven ☐ Cable tool ☐ Other
	7. USE:
	Domestic Public Supply-Permit No Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☑ Monator Well ☐
	Test Well Mognitor Well 8. CASING: Threaded Mydelded
	Diam.: Height: Above/Below
	Type: PVC Galvanized Surface ft.
2. CUTTING SAMPLES: Ds Do	Steel Other Weight lb./ft.
Complying the Lands	in toft. depth Drive Shoe?
Geophysical Logs: s (please enclose) p	fin, toft. depth
*Thickness Depth to Formation Description of Bottom of	9. SCREEN
Stratum Stratum	Type: Diam.:
	Sit/Caude: Length: Length: NOTE: MULTIPLE SCREENS
	ft, andft. USE SECOND SHEET
	Sjeve Analysis Yes (please enclose) No
	10. STATIC WATER LEVEL
	ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
	ft. afterhrs. PumpingG.P.M.
	Pumping Test: Yes (please enclose) No
	Yield:
	12. WATER QUALITY
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
	Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No
	Installed from ft. toft.
	Effective size Uniformity Coefficient 14. WELL GROUTED?
 	14. WELL GROUTED?
	Depth: From
 	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
<i>f</i>	Type well disinfected Yes Type:
	upon completion No Amount:
/	16. PUMP: Date installed: Not installed ☑
	Mfr. Name: Model No.:
	H.PVoltsLength of drop pipe ft. Capacitygpm
	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under
25.00	my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: EEG, INC Date:
3. RÉMARKS:	Registered Business Name: EEG, INC Date:
Zone F, Site 20/ Structure 240, DHEC ID# 14689	-1 -1 -1 -1
	Signed: Thomas A Brun 1. Cert. No.: 59
	Authorized Representative



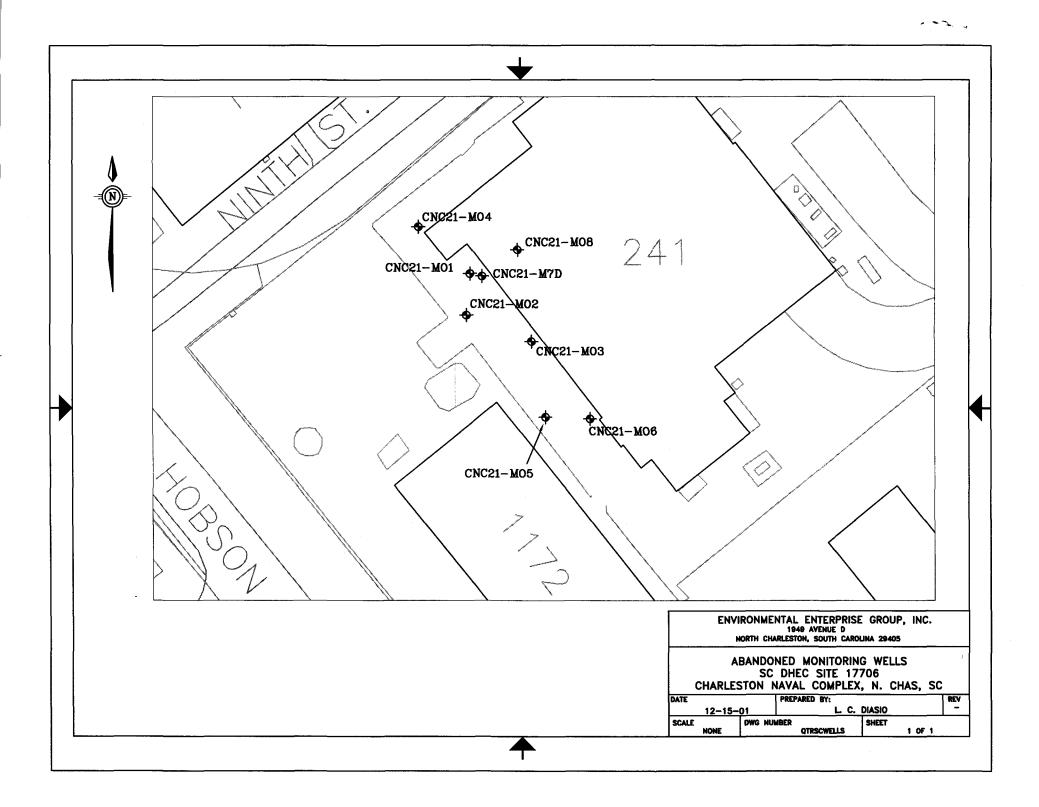


1. LOCATION OF WELL:	OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Telephone No.:
St Address & City of Well Loc: 1400 Avenue A South, N. Cha	5. WELL DEPTH (completed) Date Started:
Sketch Map:	ft. Date Completed:
See Map. Well Number: CNC21-M02	6. Mud Rotary Detted Doug
	Air Rotary Driven Cable tool Other
	7. USE: Domestic Deblic Supply-Permit No Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial
	☐ Test Well ☐ Monitor Well ☐
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below Type: PVC Salvanized Surface ft.
2. CUTTING SAMPLES: S	☐ Steel ☐ Other Weight lb./ft.
Geophysical Logs: ☐s (please enclose) ☐b	in, to/ft, depth Drive Shoe?
Geophysical Logs: s (please enclose) o *Thickness Depth to	n. to ft. depth
Formation Description of Bottom of	9. SCREEN Type: Diam.:
Stratum Stratum	Type Diam.: Length: Length:
	Set Between:ft. andft. NOTE: MULTIPLE SCREENS
	ft. USE SECOND SHEET
	Y Sieve Analysis ☐ Yes (please enclose) ☐ No 10./STATIC WATER LEVEL
	ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
	ft. afterhrs. PumpingG.P.M.
	Pumping Test: ☐ Yes (please enclose) ☐ No
	Yield:
	12. WATER QUALITY
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
F70 3	Please enclose lab results. 13. ARTIFICIAL FILTER (gravel pack) Yes No
	Installed from ft. to ft.
***	Effective size Uniformity Coefficient
Vater Manter van	14. WELL GROUTED? ☐Yes ☐No
Protection in the de	□ Neat Cement □ Sand Cement □ Concrete □ Other
	Depth: Fromft. toft.
/	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
	Type well disinfected Yes Type: upon completion No Amount:
	16. PUMP: Date installed:Not installed 🖸
	Mfr. Name: Model No.:
<i>j</i>	H.PVoltsLength of drop pipeft. Capacitygpm
/	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
(Up of short if monday)	Thy unequal and this report is the to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: DCG, LNC Date:
3. REMARKS: Zope F, Site 21/ Building 241, DHEC ID# 17706	Registered Business Name: EEG, INC Date: Address: 1949 AVENUE D, N. Chas SC 29405 Signed: Thoma A Brun Cert. No.: 54
2010 1 , Old 211 Dullding 241, DTIEO 10# 11700	Signed Thomas A Bruen & Carl No. 54
	Authorized Representative



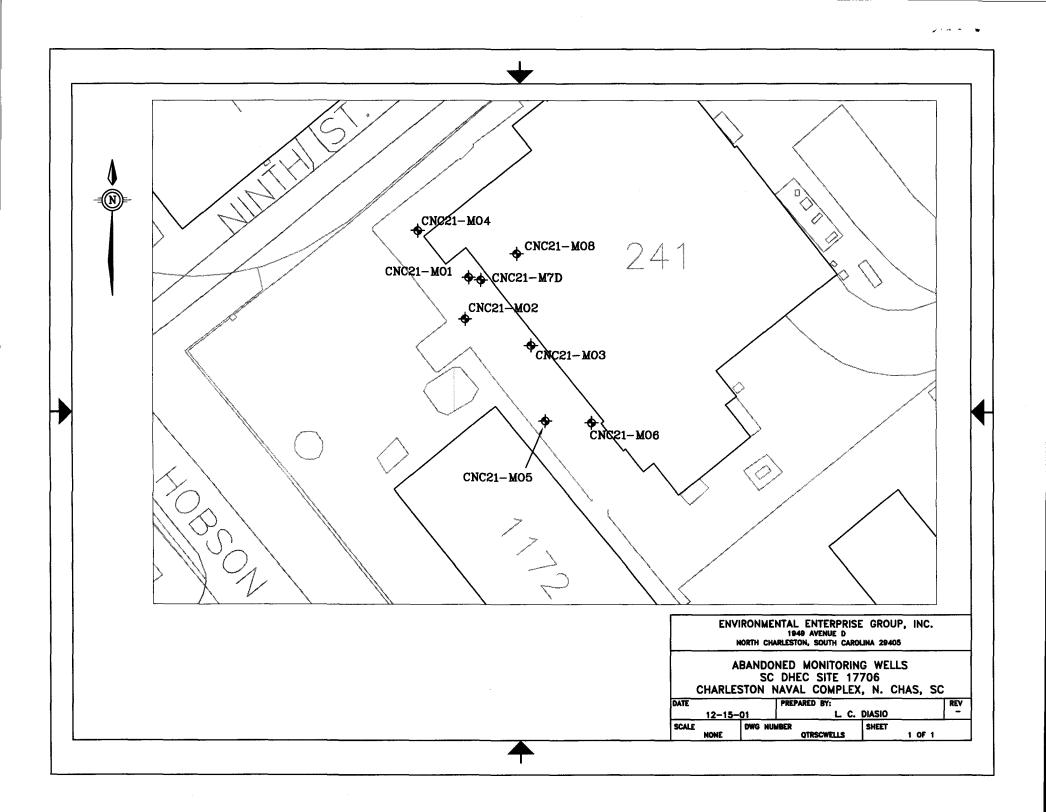


1. LOCATION OF WELL:	4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Telephone No.:
St Address & City of Well Loc: 1400 Avenue A South, N. C	
Sketch Map:	
See Map. Well Number: CNC21-M03	ft. Daté Completed: 6. Mud Rotary Jetted Bored Dug
Gee Map. Well Number. CNG2 1-MG5	☐ Air Rotary ☐ Driven ☐ Cable tool ☐ Other
	7. USE:
	□ Domestic □ Public Supply-Permit No. □ □ Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☑ Monitor Well ☐
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below
2. CUTTING SAMPLES: Des Do	Type: PV Galvanized Surfaceft.
2. COTTING OF MILECO.	☐ Steel ☐ Other
Geophysical Logs:	into ft. depth
*Thickness Depth to Formation Description of Bottom of	9. SCREEN Diam.:
Stratum Stratum	Sharksaluge: Length:
	ft. andft. NOTE: MULTIPLE SCREENS
	ft. andft. USE SECOND SHEET
	Sieve Analysis Yes (please enclose) No
	STATIC WATER LEVEL ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
	ft. after hrs. Pumping G.P.M.
	Pumping Test: Yes (please enclose) No
	Yield:
	12. WATER QUALITY
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
<u> </u>	Please enclose lab results. 13. ARTIFICIAL FILTER (gravel pack) Yes No
	Installed fromft. toft.
	Effective sizeUniformity Coefficient
	14. WELL GROUTED? ☐Yes ☐No
*	□ Neat Cement □ Sand Cement □ Concrete □ Other
	Depth: From ft. to ft.
	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
	Type well disinfected
	upon completion ☐ No Amount: 16 PLIMP: Date installed:Not installed ☑
	16. PUMP: Date installed: Not installed Mfr. Name: Model No.:
	H.PVoltsLength of drop pipeft. Capacitygpm
	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under
	my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: <u>FEG TNC</u> Date:
3. REMARKS:	Address: 1949 AVENUED, N. Chas, SC 29405 Signed: Thomas A Brusan & Cert. No.: 54
Zone F, Site 21/ Building 241, DHEC ID# 17706	The ABOURD SY
	Signed: Cert. No.: Cert. No.:
	表現的に発展されるという。 A Taggas agus A La La La La Caragas agus A La La Caragas agus Agus A La Caragas agus A La Caragas agus A La Caragas agus Agus A La Caragas agus Agus Agus Agus Agus Agus Agus Agus A



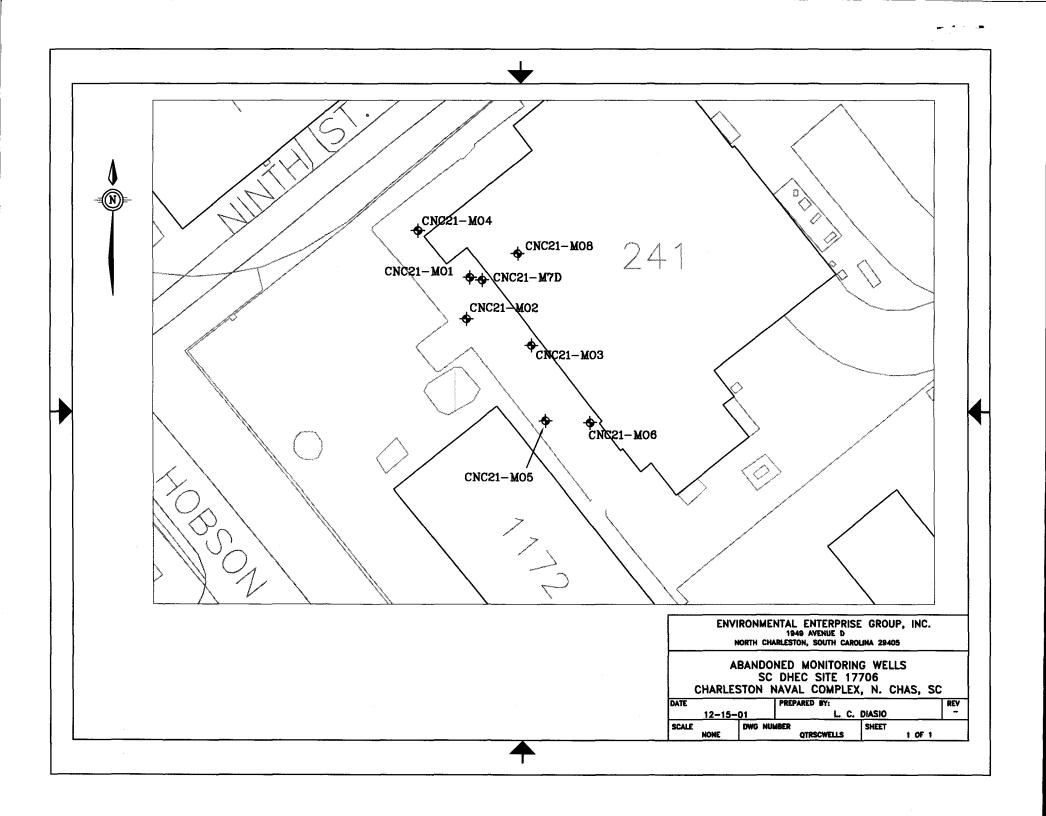


1. LOCATION OF WELL:	4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Telephone No.:
St Address & City of Well Loc: 1400 Avenue A South, N. Cha	5. WELL DEPTH (completed) Date Started:
Sketch Map:	
See Map. Well Number: CNC21-M04	ft. Date Completed: 6. ☐ Mud Rotary ☐ Jetted ☐ Bored ☐ Dug
1 Coo Map. Well Manbel. ONOZ 1-1910-	Air Rotary
	7. USE:
	☐ Domestic ☐ Public Supply—Permit No. ☐ Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial ☐ Test Well ☑ Monitor Well ☐ ☐ ☐
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below
2. CUTTING SAMPLES: Des Do	Type: PVC Galvanized Surfaceft.
	weight weight Drive Shoe? Yes No
Geophysical Logs: 📑s (please enclose) 📋	ft. depth
*Thickness Depth to Formation Description of Bottom of	9. SCRIEN
Stratum Stratum	pe Diam.: Diam.: Length:
	Sat Between:ft. andft. NOTE: MULTIPLE SCREENS
	ft. USE SECOND SHEET
	Sieve Analysis Yes (please enclose) No
	To STATIC WATER LEVEL
	ft. below land surface after 24 hours 11. PUMPING LEVEL Below Land Surface.
	ft. after hrs. Pumping G.P.M.
	Pumping Test: ☐ Yes (please enclose) ☐ No
	Yield:
	12. WATER QUALITY
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) Yes No
	Installed from ft. toft.
	Effective size Uniformity Coefficient
	14. WELL GROUTED? ☐Yes ☐No
	□ Neat Cement □ Sand Cement □ Concrete □ Other
 	Depth: From
	Type well disinfected Yes Type:
	upon completion No Amount:
	16. PUMP: Date installed:Not installed 🖸
	Mfr. Name: Model No.:
	H.PVoltsLength of drop pipeft. Capacitygpm
	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine ☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
the first Miles Basis - Zana	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under
*Indicate Water Bearing Zones	my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: EEG INC Date:
3. RÉMARKS:	Registered Business Name: <u>FEG INC</u> Date: Address: <u>1949 AVENNED, N. CM5 SC29405</u> Signed: <u>Morror</u> A Brunn J. Cert. No.: <u>54</u>
Zore F, Site 21/ Building 241, DHEC ID# 17706	Address: (1)
	Signed: Mono /7 (Drum & Cert. No.: 97
	Authorized Representative



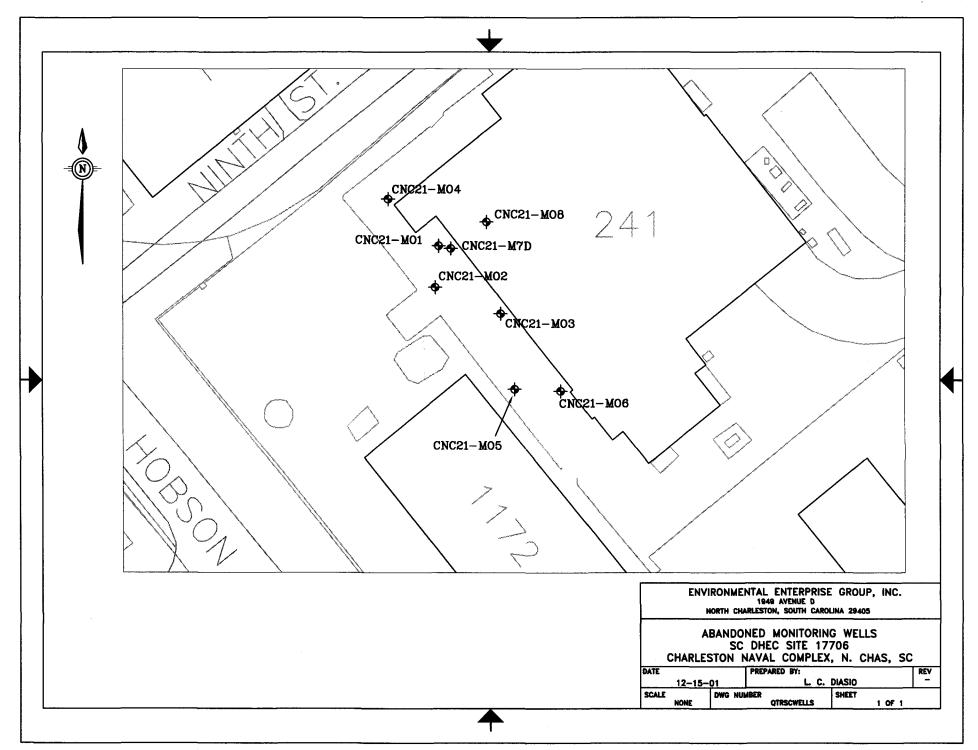


1. LOCATION OF WELL:	2000 Dail Balodi, Columbia, Co 20201 1700, (COO) 704 0000
County: Charleston System Name:	4. OWNER OF WELL: Department of the Navy Address:
	Tolophone Man
Latitude: Longitude:	Telephone No.: Engineer:
Latitude: Longitude: Distance and Direction from Road Intersections:	Address:
postance and birection from Road Intersections.	
	Telephone No.:
St Address & City of Well Loc: 1400 Avenue A South	
Sketch Map:	
See Map. Well Number: CNC21-M05	ft. Date Completed: 6. Mud Rotary Jetted Bored Dug
See Map. Well Multiper. CNC21-1905	6. Mud Rotary Detted Bored Dug Air Rotary Driven Cable tool Other
	7. USE:
	☐ Domestic ☐ Public Supply—Permit No ☐ Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial
	Test Well Monifor Well
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below Type: □ PVC □ €alvanized Surface ft.
2. CUTTING SAMPLES: Ds Do	Steel Other Weight
	ft. depth Drive Shoe? Yes No
	ft. depth
	pth to tom of raturn Diam.: Sqt/Gruge: Length:
	ratum Diam.:
	Set Year Length: Length: NOTE: MULTIPLE SCREENS
}	ft. andft. USE SECOND SHEET
	Sieve Analysis Yes (please enclose) No
	A STATIC WATER LEVEL
	ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
	ft. after hrs. Pumping G.P.M.
	Pumping Test: Yes (please enclose) No
The second secon	Yield:
	Chemical Analysis Yes No Bacterial Analysis Yes No
	Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No
	Installed fromft. toft.
	Effective sizeUniformity Coefficient
Victoria [14. WELL GROUTED? Yes No
	□ Neat Cement □ Sand Cement □ Concrete □ Other
All	Depth: Fromft. toft.
	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
	Type well disinfected Yes Type:
	upon completion No Amount:
	16. PUMP: Date installed: Not installed
	Mfr. Name: Model No.:
	H.PVoltsLength of drop pipeft. Capacitygpm
	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine ☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under
*Indicate Water Bearing Zones	my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: LEG INC. Date:
3. REMARKS:	1000 A1/6 A1/C A1/C A1/C A C C 9 DUAT
Zope F, Site 21/ Building 241, DHEC ID# 1770	O6 Address: 1949 AVENUED N. Chas. SC 29405 Signed: Thomas A Brush 2 cert. No.: 54
	Signed: Thomas A Roun 2 Cert. No.: 54
	Authorized Representative



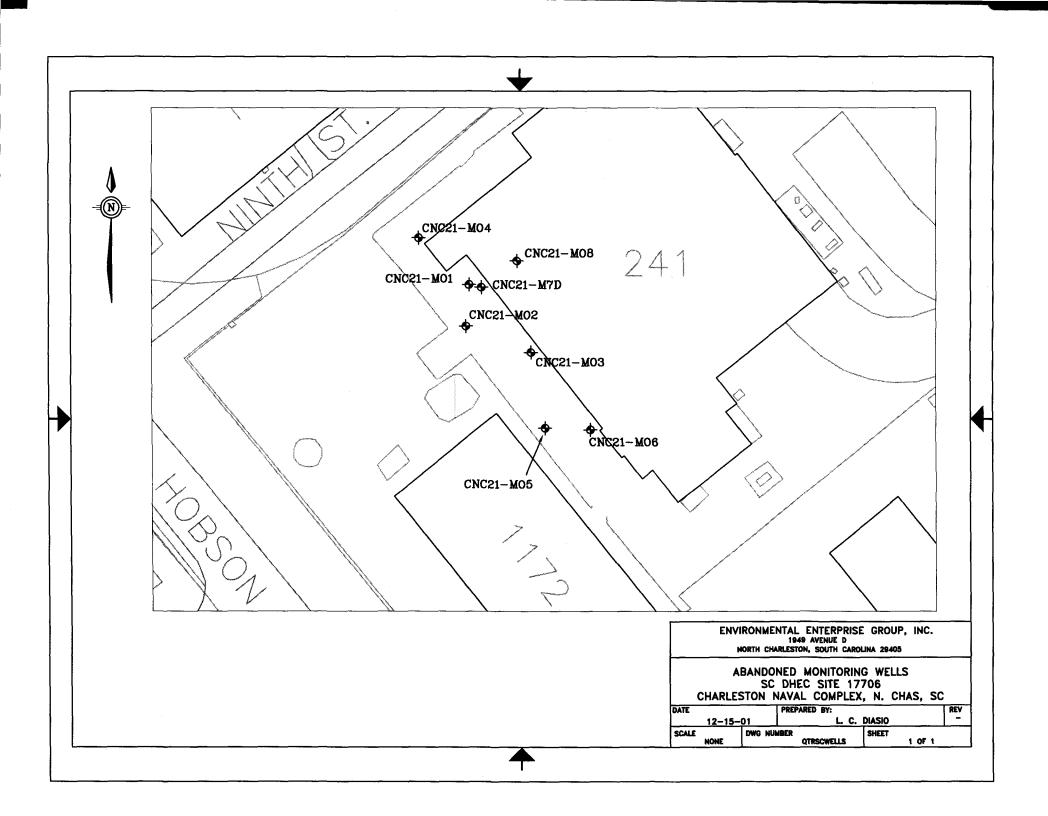


1. LOCATION OF WELL:	OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
St Address & City of Woll Lee: 4	Telephone No.: 5. WELL DEPTH (completed) Date Started:
St Address & City of Well Loc: 1400 Avenue A South, N. Cha	
·	ft. Date Completed:
See Map. Well Number: CNC21-M06	6. Mud Rotary Jetted Mored Dug Air Rotary Driven Cable tool Other
·	7. USE: Domestic Public Supply—Permit No Industry Irrigation Air Conditioning Commercial Test Well Monitor Well
	8. CASING: Threaded Welded Diam.: Height: Above/Below
	Type: PVC Galvanized Surface ft.
2. CUTTING SAMPLES: Ds Do	Steel Øther Weight lb./ft.
Geophysical Logs: s (please enclose) o	in. to ft. depth
*Thickness Depth to Formation Description of Bottom of	9. SCREEN Type: Diam.: Slot/Guige Length: Set Briveen: ft. and ft. NOTE: MULTIPLE SCREENS
Stratum Stratum	Slot/Geuge Length:
	ft. NOTE: MULTIPLE SCREENS
	ft. andft. USE SECOND SHEET
	A STATIC WATER LEVEL
	ft. below land surface after 24 hours
	1. PUMPING LEVEL Below Land Surface.
	ft. afterhrs. PumpingG.P.M.
	Pumping Test: Yes (please enclose) No
	Yield:
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
	Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No
	Installed from ft. toft.
	Effective sizeUniformity Coefficient
<i></i>	14. WELL GROUTED? Yes No
*	□ Neat Cement □ Sand Cement □ Concrete □ Other
	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
	Type well disinfected Yes Type:
	upon completion No Amount:
	16. PUMP: Date installed:Not installed 🖸
	Mfr. Name: Model No.:
	H.PVoltsLength of drop pipeft. Capacitygpm TYPE: Submersible Jet (shallow) Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
(Use/a 2nd sheet if needed)	Registered Business Name: EEG, INC Date:
3. REMARKS: Zone F, Site 21/ Building 241, DHEC ID# 17706	Address: 1949 AVENUE D. N. Chas, SC 29405
Lord 1, Oile 217 Building 241, Direction 17700	Signed: Thomas A Rown & Cert. No.: 54
	Authorized Representative



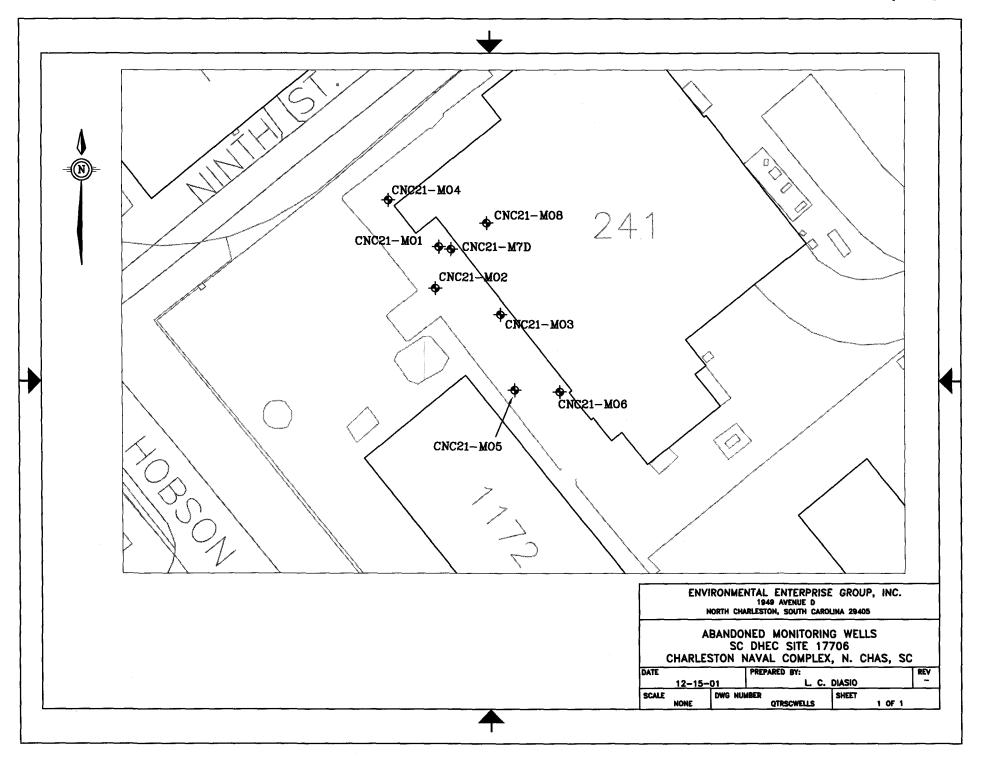


1. LOCATION OF WELL:	4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address: Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	- Address:
St Address & City of Well Loc: 1400 Avenue A South, N. Cha	Telephone No.: 5. WELL DEPTH (completed) Date Started:
Sketch Map:	ft. Date Completed:
See Map. Well Number: CNC21-M08	6. Mud Rotary Jetted Bored Dug Air Rotary Driven Cable tool Other
	7. USE: Domestic Public Supply—Permit No. Industry Irrigation Air Conditioning Commercial Test Well Monitor Well
	8. CASING: Threaded Welded Diam.: Height: Above/Below
2. CUTTING SAMPLES: 🛅s 🗂o	Type: PVC Galvanized Surface ft. Steel Other Weight lb./ft. in. to ft. depth Drive Shoe? Yes No
Geophysical Logs:	in. toft. depth
*Thickness Depth to Formation Description of Bottom of Stratum Stratum	9. SCREEN Type Diam.:
Stratum Stratum	Length: Set Befween: ft. and ft. NOTE: MULTIPLE SCREENS ft. and ft. USE SECOND SHEET Sieve Analysis Yes (please enclose) No
~~~	10 STATIC WATER LEVEL ft. below land surface after 24 hours
	11. PUMPING LEVEL Below Land Surface.
y Y	ft. afterhrs. Pumping G.P.M. Pumping Test:  Yes (please enclose)  No
	Yield:
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) Yes No Installed fromft. toft.
	Effective sizeUniformity Coefficient  14. WELL GROUTED?
	☐ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other
	Depth:         From
	Type well disinfected
	upon completion  No Amount:
	16. PUMP: Date installed:Not installed
	Mfr. Name: Model No.: H.P Volts Length of drop pipe ft. Capacitygpm
	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine
	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
(Use a 2nd sheet if needed)	Registered Business Name: <u>EEG, TNC</u> Date:
3. REMARKS: Zopie F, Site 21/ Building 241, DHEC ID# 17706	Address: 1949 AVENUE D. N. CMS. SC 29405  Signed: Authorized Representative  Cert. No. 54





1. LOCATION OF WELL:		4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:		Address:
		Telephone No.:
Latitude: Longitude:		Engineer:
Distance and Direction from Road Intersections:		- Address:
St Address & City of Woll Los: 4400 A		Telephone No.:  5. WELL DEPTH (completed)  Date Started:
St Address & City of Well Loc: 1400 Avenue A Sketch Map:	South, N. Cha	
See Map. Well Number: CNC21-M08		ft. Daté Completed:  6. Mud Rotary Jetted Bored Dug
Coo Map. Won Hamber. Cite21 Moo		☐ Air Rotary ☐ Driven ☐ Cable tool ☐ Other
		7. USE:
		☐ Domestic ☐ Public Şdı́pply—Permit No ☐ Industry ☐ Irrigation ☐ Air Conditioning ☐ Commercial
		☐ Test Well ☑ Monitor Well ☐
		8. CASING: Threaded Welded
		Diam.: Height: Above/Below Type: PVC Galvanized Surface ft.
2. CUTTING SAMPLES: Des Do		☐ Steel ☐ Other Weight lb./ft.
Geophysical Logs: ☐s (please enclose	\ <b></b>	in. toft. depth   Drive Shoe?
*Thickness	Depth to	9. SCREEN
Formation Description of	Bottom of	Type Diam.:
Stratum	Stratum	Length:
		ft. andft. NOTE: MULTIPLE SCREENS USE SECOND SHEET
		Sieve Analysis Yes (please enclose) No
	100	10, STATIC WATER LEVEL
		ft. below land surface after 24 hours
	- XX	11. PUMPING LEVEL Below Land Surfaceft. afterhrs. PumpingG.P.M.
	$\perp$ $\sim$	Pumping Test:  Yes (please enclose)  No
		Yield:
		12. WATER QUALITY
	$\mathcal{X}$	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
	/	Please enclose lab results.  13. ARTIFICIAL FILTER (gravel pack) Yes No
		Installed fromft.
		Effective size Uniformity Coefficient
/		14. WELL GROUTED? ☐Yes ☐No
	1	□ Neat Cement □ Sand Cement □ Concrete □ Other
	<u> </u>	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: ft direction
		Type well disinfected
		upon completion  No Amount:
		16. PUMP: Date installed:Not installed ☑
		Mfr. Name: Model No.: H.P Volts Length of drop pipe ft. Capacitygpm
		TYPE: Submersible Jet (shallow) Turbine
		☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones		17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief.
(Use 2nd about if ===d=d)		
(Use a 2nd sheet if needed)  3. REMARKS:		Address: 1949 AVENUED N.CMS SC 29405 Signed: Thomas A Bruss Cert. No. 54
Zope F, Site 21/ Building 241, DHEC ID#	17706	Address: 1717 AVENUE 1), N. CMS, SC 19403
		Signed: Thomas A Drus With Cert. No. 54
		Authorized Representative





1. LOCATION OF WELL:	4. OWNER OF WELL: Department of the Navy
County: Charleston System Name:	Address:
	Telephone No.:
Latitude: Longitude:	Engineer:
Distance and Direction from Road Intersections:	Address:
	Talanhana Na
Chrost Address A City of ACCA No. 10	Telephone No.:  5. WELL DEPTH (completed)  Date Started:
Street Address & City of Well 1200 Navy Way, N. Chas.	3. WELE DET TH (completed) Date Statted.
Sketch Map:	ft. Date Completed:
Well Number: CNC28-M03	6. Mud Rotary Jetted Bored Dug
See attached map for well location.	Air Rotary Driven Cable tool Other  7. USE:
	7. USE:  Domestic Public Supply-Permit No Industry
	☐ Irrigation ☐ Air Conditioning ☐ Commercial
	☐ Test Well ☑ Mop/for Well ☐
	8. CASING: Threaded Welded
	Diam.: Height: Above/Below Type: PVC Alavanized Surface ft.
2. CUTTING SAMPLES: Yes No	Type: PVC Algalvanized Surface ft.  Steel Other Weight Ib./ft.
	in. toft. depth   Drive Shoe?
Geophysical Logs:	in. to/ ft. depth
*Thickness Depth to Formation Description of Bottom of	9. SCREEN
Formation Description of Bottom of Stratum	Type: Diam.:
	Slot/Gauge: Length: Set Between: ft. and ft. NOTE: MULTIPLE SCREENS
	ft. andft. USE SECOND SHEET
	Sieve Analysis Yes (please enclose) No
	107 STATIC WATER LEVEL
1	ft. below land surface after 24 hours
X	11. PUMPING LEVEL Below Land Surface.
	ft. afterhrs. Pumping G.P.M.
	Pumping Test:  Yes (please enclose) No
	12. WATER QUALITY
	Chemical Analysis ☐ Yes ☐ No Bacterial Analysis ☐ Yes ☐ No
	Please enclose lab results.
	13. ARTIFICIAL FILTER (gravel pack) ☐ Yes ☐ No
	Installed fromft. toft.
	Effective size Uniformity Coefficient
//	14. WELL GROUTED? Yes No
	☑ Neat Cement ☐ Sand Cement ☐ Concrete ☐ Other
	Depth: From
the state of the s	15. NEAREST SOURCE OF POSSIBLE CONTAMINATION: π direction Type well disinfected  \[ \textstyre \textstyres \textstyre
	upon completion No Amount:
	16. PUMP: Date installed:Not installed 🖸
7	Mfr. Name: Model No.:
****	H.PVolts Length of drop pipe ft. Capacitygpm
	TYPE: ☐ Submersible ☐ Jet (shallow) ☐ Turbine
With Sample Control	☐ Jet (deep) ☐ Reciprocating ☐ Centrifugal
*Indicate Water Bearing Zones	17. WATER WELL CONTRACTOR'S CERTIFICATION: This well was drilled under my direction and this report is true to the best of my knowledge and belief:
(Use a 2nd sheet if needed)	그 그 그는 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그 그
3. REMARKS:	Registered Business Name: EEG, Inc. Date:
Zone E, Site 28 / Building 590A, DHEC ID# 00956	Address: 1949 Avenue D, N. Charleston, SC 29405
	Signed: Momos A Brum 2 Cert. No.: 54
	Authorized Representative

